FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Alice Allen					0.0	atti atta Nimal	
	(b) Address (number and street) 9564 Wilson Bridge Dr	☐ Check if address changed				Candidate's FEC Identification Number P60016433		
	(c) City, State, and ZIP Code						ew Amended	
	St. Louis	MO 63136				Statement X (N	I) OR (A)	
4.	Party Affiliation	5. Office Soug			6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	Presidenti	al					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
	None							
	(b) Address (number and street) 9564 Wilson Bridge Dr							
	() 0'' 0' 1710 0 1							
	(c) City, State, and ZIP Code							
	St. Louis				MO	63136		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(b) Address (number and street)								
(c) City, State, and ZIP Code								
	I certify that I have exa	mined this State	ement and to	the best of	my knowledge a	and belief it is true, correct	and complete.	
Signature of Candidate Date								
	iss Alice Allen					40/05/0045		
				[Elec	tronically Filed]	10/05/2015		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
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FEC FORM 2 (REV. 02/2009)